

EDITORIALS

OUR GOVERNOR'S ANTI-QUACK ANNOUNCEMENT

If press dispatches are accurate, Governor Richardson has at last been aroused by the well-directed efforts and publicity of the League to the menace of quackery in California. We read in the press that our Governor is now going to weed out all impostors, fakes and quacks and close all "diploma mills." If this be true and truly carried out, we will review the Governor's good work gladly and lead the chorus in peals of praise.

Although we are eager to accept the anti-quack announcement at face value, facts prevent us and demand a large discount. We recall that one of Governor Richardson's administration bills, introduced at the last Legislature, would have placed the State Board of Medical Examiners, Board of Dental Examiners, State Board of Pharmacy, and Board of Veterinary Medicine under a lay director with power to issue licenses to and suspend or revoke licenses of the members of the various professions named. We remember that when the Governor's budget was the storm center of discussion, during the weary wasteful days of the last Legislature, the Health Board and the Board of Medical Examiners protested cuts made in their appropriations and stated that amounts allowed by the Governor would prevent them from carrying on their work with any degree of efficiency. We recall his veto of the anti-quack bill and the excuses offered. No one will question that the reduced activity of the State boards against unlicensed "doctors" during 1923 is in strong contrast to the Board's activity of 1922 and preceding years. It is stated on high authority that the Board's activity had to decrease because of lack of financial and other support.

Whether the Governor is now merely making a graceful "gesture" or is really changing his attitude will be determined by deeds and not by his announcements. In reference to the quackery problem, the road of duty is before the Governor plain and direct. Those entrusted with official power are false to their duty and responsibility if they license the uneducated and untrained, the mentally and morally unfit; but they are more false to duty and invade the rights of the citizens if they tolerate the unlicensed to prey upon the public.

If the Governor really intends to carry out his anti-quack announcement and protect the public, he will start right by prosecuting all those who are attempting to treat for money, diseases, injuries and deformities of the men, women and children of California in defiance of the laws of California. No sensational quiz or probe is required, for the names and addresses of many such "doctors" must be known to the Board. To find the names of a charming variety of unlicensed "doctors," who are apparently practicing in defiance of law with impunity and immunity, is not difficult.

As far as we are able to observe, such "doctors" are undaunted by the Governor's anti-quack announcement and continue to let their electric lights shine before men and their ads attract the shekels.

No matter how many gubernatorial "gestures" are made, and no matter how much partisan applause they receive, pantomimic warfare will not protect the public from "diploma mills" and the unfinished products which they are grinding out. It requires real laws and real enforcement of real laws to protect the public from misrepresentation, imposition and fraud of the many varieties of spurious healers and cultists masquerading under the title of "doctor." The loose use and abuse of the word "doctor," and the deplorable condition which enables a so-called college or "diploma mill" to be legally chartered for less money than a quack receives for one of his dangerous treatments, must be remedied by the next Legislature before any anti-quack announcement can be considered seriously.

SAFETY OF THE HYPODERMIC ADMINIS- TRATION OF DIGITALOID PREPARATIONS

The administration of the digitaloids subcutaneously is almost universally held to be undesirable, if not unsafe, because of the pain and the local inflammatory reaction, resulting in abscess formation. This is true especially of strophanthin; hence, the usual practice of intravenous injection of the digitaloid glucosides, or administration of the galenicals and dry digitalis by mouth. The intravenous route has its obvious objections, and the oral may be slow, irregular and inefficient. The hypodermic and intramuscular routes would offer several advantages, namely, ease of administration and promptness of absorption, especially in emergencies and in conditions precluding administration by mouth, and in such conditions as stasis of the hepatic and portal circulations. What has been hitherto thought undesirable and unsafe has been rendered practically feasible and safe by the recent work of Freud and Meyer of the Pharmacological Institute in Vienna on animals and patients.

Freud and Meyer showed that the digitaloids can be injected subcutaneously for their usual effects, and with impunity. This was accomplished by adding local anesthetics to the digitaloid solutions to be injected. Freud and Meyer used novocain (procain) and alypin in 5 per cent strengths. Firstly, they showed that dogs, which were found to be highly susceptible to experimental abscess formation from digitaloids alone, could be injected with mixtures of the same digitaloids and the anesthetics without local inflammatory reaction. The digitaloids that were tested were digitoxin, digipuratum, digalen, strophanthin, cymarin, and squills. All of these, except digitoxin, were injected subcutaneously together with procain (0.02 to 0.03 gm.) without producing pain and local inflammatory reaction. Then the Viennese pharmacologists tested the mixtures on patients with multiple sclerosis, neuritis and hemiplegias, and confirmed their results on dogs. For this purpose one side of the

body was used as control (without the anesthetic) and the other side was used for testing the digitaloid-anesthetic mixture, using pain and local inflammatory reaction as criteria. Under these conditions Freud and Meyer found that only 25 out of 138 patients injected with digitaloids together with local anesthetics (usually 5 per cent procain) showed evidences of inflammation, while 32 out of 37 controls without anesthetics showed marked inflammatory reactions. Strophanthin was injected together with procain in 55 out of 63 patients without local inflammation and pain.

Freud and Meyer conclude that digalen, digipuratum, squills, cymarin, and strophanthin can be injected subcutaneously without irritant effects, and that the indications for therapy of cymarin and strophanthin are extended and their use made easier and safer. In view of the practical importance of the subject, confirmation of these results is highly desirable in cases without the limitations enjoined by disease in the series employed by Freud and Meyer.

Freud, P. and Meyer, H. H.: Deutsch. med. Wochn., 1922, No. 37, "Über nicht zündende Subkutaninjektion entzündlich wirkenden Heilmittel."

ARE OPTOMETRISTS TECHNICIANS OR DOCTORS?

There are two classes of "optometrists." Members of one of these groups consider themselves technicians or prescription opticians of other days. The other and far larger group consider themselves "eye specialists." They do not confine their activities to the technical work of correcting by glasses errors of refraction in healthy eyes of healthy people. Too many of them are undertaking work which they have not been educated to do with safety.

"Optometrists" who wish to undertake the responsibilities of "eye specialist" should be required to have education comparable to that of other ophthalmologists. The others should continue their very necessary and important work as prescription opticians.

Sad stories are told of the injuries done to citizens, and children in particular, by "fitting glasses" to eyes that would have spoken clearly to the educated person of important diseases calling urgently for skilled care of more than the eye. The use of blue and red light electricity and other forms of therapy, without correct diagnosis of diseases producing eye symptoms as one of their manifestations, is frequently responsible for serious consequences to the patient.

The eyes are most important organs of the body, which cannot be separated into parts for purposes of diagnosis and treatment of diseases and abnormalities by those who have not had adequate education and training in the anatomy, physiology, pathology, and clinical manifestations of disease and abnormalities as they affect the entire human organism.

This is precisely what is being done in ever-increasing volume throughout this country. California is well forward in this movement, as it is in other movements calculated to provide inadequate

medicine for the citizens of the State. This situation is destined to do much harm for an indefinite number of years, until the public some day in some way is made to understand.

A particularly discouraging and distressing feature of the problem is the recent action of the great State University in introducing the teaching of this branch of medicine under the department of *Physics*. This is the culmination of years of effort by the optometrists. Heretofore, the faculty of the medical school has insisted that, if optometrists were to be taught to practice medicine or to be technicians in a medical field, they should have adequate special education given by the medical school faculty.

Unquestionably, the department of physics will teach the mechanics of the subject better than it has been taught before. But they and their students apparently fail to understand that only a certain percentage of errors of refraction occur in otherwise healthy people. Honesty and fair-dealing demand that someone should determine before glasses are fitted, whether the eye trouble in any patient requires mechanical correction only. If optometrists wish to make this determination for themselves, they should have more medical education. Otherwise, they should recognize themselves as technicians, as some of them do, and limit their work to the fitting of glasses in patients who have been examined by those qualified to make diagnoses.

Many of the better educated among the optometrists realize their limitations. Some are limiting their work accordingly, and others are taking time to prepare themselves for wider responsibilities by better education.

The larger and more militant portion of their powerful organization are out for further expansion of their legal privileges by political rather than educational prestige. They claim the "eye for the optometrists," and in the language of the street, they are "getting away with it." They have recognition by the State Board of Education. They promote organizations to prevent blindness, give clinics, and otherwise follow the usual channels of publicity and propaganda.

It is exceedingly unfortunate and regrettable that the authorities of the University of California should have endorsed a situation that unquestionably will sooner or later cause them embarrassment.

THE INCIDENCE OF INTESTINAL PARASITES

Under this title there is published in this number of the Journal an article by Marshall C. Cheney of San Francisco, with discussion by Alfred C. Reed, John V. Barrow, and Herbert Gunn. Editorial comment upon the subject is made at this time because it is one that does not receive the attention by physicians in general that it deserves.

Aside entirely from the question of parasitism, there is a great deal of evidence of inestimable value to physicians that may be acquired by careful and accurate routine examination of stools. Such routine examination with appropriate stain-